# White House Conference on Aging Independent Aging Agenda Event

### Post-Event Summary Report Georgia Event 3 of 5

Name of Event: Georgia Council on Aging

April 2005 Independent Aging Agenda Event

Date of Event: April 21, 2005

Location of Event: First Baptist Church of Augusta

Augusta, GA

# Persons Attending: 60

Sponsoring

Organizations: Georgia Council on Aging, Georgia Division of Aging Services,

Georgia Association of Area Agencies on Aging, Georgia

Gerontology Society

Contact Name: Maria A. Greene (Director, Georgia Division of Aging Services)

Telephone Number: (404) 657-5252 E-Mail: magreene@dhr.state.ga.us

WHCoA Agenda Item C: "Our Community"

**Selected Topics:** Transportation, Caregiving, Coordination between Health and Aging, Eldercare Worker Shortage, Senior Centers, Housing

# ■ Priority Issue # 1:

Affordable, Accessible Transportation

## **Description:**

Older Georgians and helping professionals continue to rank transportation as a top-priority issue that affects access to healthcare, aging resources, basic goods and services, and essential social networks. Participants cite the need for widely available transportation services that are equitably distributed, reliable, moderately priced, and convenient for riders with functional impairments.

#### **Barriers:**

The following barriers affect the quality of transportation services: (Cont.)

p. 1/5- Georgia DHR Div. of Aging Services (Maria Greene, Director – (404) 657-5252 / magreene@dhr.state.ga.us)

### **Transportation - Barriers,** cont.

- fragmented regulations and funding sources coupled with high operating costs such as liability, fuel, and background checks;
- rural and urban transportation plans that do not adequately tie older adults to key service hubs such as senior centers;
- restrictive customer relations policies and limited rider assistance; and
- inadequate support for potential non-traditional providers such as faith-based organizations.

### **Solutions:**

- Systematically assess and respond to needs by implementing a planning strategy that includes grassroots consumer-driven surveys, town forums, focus groups located in easy-access neighborhood hubs, ongoing legislative advocacy, base studies, and comprehensive analysis.
- Make basic goods and services more accessible to consumers by encouraging businesses and
  volunteer groups to provide shopping services and deliveries. Spark innovation by offering tax
  cuts to businesses that adopt elder-friendly practices and by programmatically supporting
  volunteer efforts that connect seniors with goods and services.
- Broaden the coordination of transportation services to maximize the use of municipal and school buses, light rail, taxi discounts and vouchers, and faith-based services. Aggressively recruit nonprofits and small businesses to participate in the contract bidding process and provide strong program support for alternatives such as vouchers and volunteer programs.
- Enhance personnel training opportunities, require greater accountability and commitment to service improvement, and analyze existing routes' compatibility with seniors' living and shopping patterns. Develop a contingency grant program for transportation, featuring performance incentives such as larger grant awards or lower insurance costs in recognition of superior customer service and high responsiveness to consumer needs.

# ■ Priority Issue # 2:

Adequate Services and Quality Support for Family and Non-Family Caregivers

# **Description:**

Tools for advance preparation, education about community resources, convenient access to support, and awareness of what constitutes caregiving are keys to improving caregiver services.

#### **Barriers:**

- Many caregivers do not seek support because they do not identify themselves as caregivers.
- The general population lacks sufficient education about the normal aging process.
- Potential caregivers and their aging relatives are not discussing and preparing for future needs.
- The aging network has not developed effective ways to market to younger audiences.

#### **Solutions:**

- Educate families -- not just primary caregivers -- and treat families as caregiving teams.
- Use TV and radio, print, and the Internet in a coordinated PR and advertising campaign that delivers key messages about caregiving to multiple age groups.
- Develop outreach coalitions with diverse partners such as faith communities, school systems, and organizations that serve individuals at a variety of life stages.

### Caregivers - Solutions, cont.

• Implement support solutions that address a variety of needs by regularly providing respite for traditional support groups, helping caregivers network with peers ("call buddies") via telephone, and spearheading Internet support groups within states.

# ■ Priority Issue # 3:

Coordination between Health and Aging Networks

### **Description:**

Uncoordinated funding, conflicting eligibility requirements, and inconsistent professional education standards hamper efforts to create seamless healthcare services for older adults. Advocates note, however, that the following collaborative efforts show progress – community health centers, combined waiver programs, self-directed care initiatives, public education partnerships with pharmacies, and the bundling of free health and aging programs within local areas.

### **Barriers:**

- Funding restrictions prevent organizations from fluidly combining and coordinating money from multiple fund sources.
- Geographic discrepancies in service provider rates result in unequal access to services.
- Physicians and their staffs lack sufficient education in geriatric care, resource availability, service coordination, and techniques for effective communication with older patients.
- Aging and healthcare networks lack a national long-term care policy to guide decision-making.
   In addition, the two networks need stronger mechanisms for sharing best practices, coordinating efforts, and jointly educating the public.

### **Solutions:**

- Establish a national long-term care policy that addresses the following issues: holistic care approaches, effective disease management, geriatric and gerontology education, insurance incentives to promote healthy practices, education in prevention and self responsibility, and the integration of mental health with healthcare and aging.
- Expand telemedicine programs to meet the needs of rural residents.
- Reduce regulatory barriers by allowing agencies to justify transfers of funding.
- Verbatim: "Strengthen and expand Medicare." "Rescind the Medicare Modernization Act."
- Educate younger people about the importance of long-life planning. Develop tools (such as check-off lists) to help individuals take charge of personal planning throughout their life stages.
- Align payment policies with the continuum of care necessary for the aging.

# ■ Priority Issue # 4:

The Eldercare Worker Shortage

## **Description:**

System-wide improvements in working conditions, benefits, compensation, and career development are pivotal to increasing recruitment success, retention rates, effectiveness, and morale among eldercare workers.

### Eldercare Worker Shortage, cont.

#### **Barriers:**

- Staff-to-patient ratios are too high.
- Turnover is high because of low wages, inadequate benefits, job instability, and frequently poor working conditions.
- Opportunities for advancement are limited, and organizations do not provide adequate training for career development.

#### **Solutions:**

- Develop a more defined career ladder for eldercare workers.
- Adjust the minimum staff-to-patient ratio.
- Increase public funding of eldercare services through innovations such as a flat-rate tax and other alternative solutions.
- Increase training available to rural eldercare workers.

# ■ Priority Issue # 5:

Re-configuring Senior Centers to Serve a New Generation

### **Description:**

Although senior centers are focal points for service referrals, education, and activities, they lack the funding, facilities, equipment, staff, and marketing power needed to reach their potential as mind-body wellness centers and community coordinating agencies.

#### **Barriers:**

- The aging population was undercounted during the last census.
- Many facilities are small, poorly designed, unattractive, and/or inadequately maintained. They typically lack adequate computers and fitness equipment.
- Site managers need more education on how to develop effective aging programs, how to troubleshoot in complex referral situations, and how to mobilize their communities in advocating for increased services.
- The public has a biased perception of senior centers often regarding them as "low-income" programs and failing to recognize diversity in the ages and functional capacities of participants.
- Short operating hours and inconvenient transportation options limit audience participation.

#### **Solutions:**

- Hold focus groups for 45-55 yr olds, politicians, and other targeted groups to gather input for long-range planning. Develop new marketing approaches to attract seniors at multiple income levels and dispel the notion of senior centers as facilities for income-restricted programs.
- Regularly invite politicians to center events; and use media more aggressively to publicize events, identify needs, solicit community input, and attract supporters.
- Obtain 501(c)(3) status to secure individual contributions and meet eligibility requirements for grants. Pursue a greater variety of alternative funding sources such as 1% sales tax funds, foundation grants, and business sponsorships.

### **Senior Centers - Solutions, cont.**

- Strengthen centers' wellness focus by regularly offering screenings, exercise classes, health and nutrition education, seminars to promote health awareness, and access to fitness equipment.
   Offer a variety of activities geared to younger seniors pools, spas, cruises, arts and crafts, and a daily choice of menu selections.
- Maximize staff resources by formally coordinating volunteers, requesting specific pro bono services from local professionals, and seeking donated training opportunities for employees.
- Change the name "Senior Center" to "Wellness Center."

# ■ Priority Issue # 6:

Affordable, Accessible, Plentiful Housing

### **Description:**

Home modification services and the construction of accessible buildings are unable to keep pace with today's intense demand for senior-friendly housing. Aging services that enable functionally impaired seniors to live at home must be offered in conjunction with access to safe, accessible built environments that facilitate aging in place.

#### **Barriers:**

- Funding is insufficient.
- Zoning restrictions and bias limit the development of low-income and multi-family housing.
- Low-income housing is in disrepair and in short supply, and planned senior communities are frequently outside the price range of most older adults.
- Housing managers lack training to address the needs of older adults with mental illness.
- Limited rural housing options are available.
- Transportation points, laundry facilities, grocery stores, and pharmacies are not conveniently and strategically located close to high concentrations of older residents.
- Individuals lack knowledge of home modification solutions and assistance resources. In addition, they are often unwilling to relocate.
- It is difficult to identify housing contractors willing to take on home modification projects.

#### **Solutions:**

- Develop a statewide initiative to fund and coordinate home modification efforts through municipal governments, nonprofits, and organizations such as Area Agencies on Aging.
- Provide incentives for builders to develop new construction that is accessible, adaptable, and available to individuals in a range of income categories.
- Ease zoning restrictions that limit construction of new, accessible housing.
- Increase public awareness of the need for affordable, accessible housing; and encourage individuals to select current housing options that are adaptable for late-life needs. Develop a grassroots public education strategy that reaches urban and rural residents in the neighborhoods where they live.